

Application or Docket Number

Substitute for Form PTO-875

Application or Docket Number
10/707,077

SMALL ENTITY

(Column 1)

(Column 2)

OR

OTHER THAN CLAIMS AS FILED --
SMALL ENTITY

SMALL ENTITY

| FOR | NUMBER FILED | NUMBER EXTRA |
|---|---------------|--------------|
| BASIC FEE (37 CFR 1.16(a)) | | |
| TOTAL CLAIMS (37 CFR 1.16(c)) | 21 minus 20 = | 1 |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | 3 minus 3 = | 0 |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | |

| RATE | FEE |
|----------------|----------------|
| 375 | 375 |
| x <u>25</u> = | 25 |
| x \$ _____ = | |
| + \$ _____ = | |
| TOTAL | 419 |

| RATE OR | FEE |
|---------------------|----------|
| PER HOUR CHARGE | \$ _____ |
| OTHER CHARGES | _____ |
| TOTAL CHARGE | \$ _____ |
| PAID BY CREDIT CARD | _____ |
| PAID BY CASH | _____ |
| TOTAL PAID | \$ _____ |
| AMOUNT DUE | \$ _____ |
| TOTAL DUE | \$ _____ |

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY (Column 1)

Column: 1

| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---------------------------------|---------------------------|---|-------|---|------------------|
| | Total (37 CFR 1.16(c)) | * | 21 | Minus | ** 21 |
| Independent (37 CFR 1.16(b)) | * | 3 | Minus | *** 3 | = 0 |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

| RATE | ADDITIONAL FEE |
|--------------------|----------------|
| X \$ _____ = | |
| X \$ _____ = | |
| + \$ _____ = | |
| TOTAL ADD'L FEE | |

| | |
|--------|--------------|
| 1 RATE | 1 CLAIM |
| 2 | 2 ADDITIONAL |
| 3 | 3 MONTHLY |
| 4 | 4 FEE PER |
| 5 | 5 |
| 6 | 6 |
| 7 | 7 |
| 8 | 8 |
| 9 | 9 |
| 10 | 10 |
| 11 | 11 |
| 12 | 12 |
| 13 | 13 |
| 14 | 14 |
| 15 | 15 |
| 16 | 16 |
| 17 | 17 |
| 18 | 18 |
| 19 | 19 |
| 20 | 20 |
| 21 | 21 |
| 22 | 22 |
| 23 | 23 |
| 24 | 24 |
| 25 | 25 |
| 26 | 26 |
| 27 | 27 |
| 28 | 28 |
| 29 | 29 |
| 30 | 30 |
| 31 | 31 |
| 32 | 32 |
| 33 | 33 |
| 34 | 34 |
| 35 | 35 |
| 36 | 36 |
| 37 | 37 |
| 38 | 38 |
| 39 | 39 |
| 40 | 40 |
| 41 | 41 |
| 42 | 42 |
| 43 | 43 |
| 44 | 44 |
| 45 | 45 |
| 46 | 46 |
| 47 | 47 |
| 48 | 48 |
| 49 | 49 |
| 50 | 50 |
| 51 | 51 |
| 52 | 52 |
| 53 | 53 |
| 54 | 54 |
| 55 | 55 |
| 56 | 56 |
| 57 | 57 |
| 58 | 58 |
| 59 | 59 |
| 60 | 60 |
| 61 | 61 |
| 62 | 62 |
| 63 | 63 |
| 64 | 64 |
| 65 | 65 |
| 66 | 66 |
| 67 | 67 |
| 68 | 68 |
| 69 | 69 |
| 70 | 70 |
| 71 | 71 |
| 72 | 72 |
| 73 | 73 |
| 74 | 74 |
| 75 | 75 |
| 76 | 76 |
| 77 | 77 |
| 78 | 78 |
| 79 | 79 |
| 80 | 80 |
| 81 | 81 |
| 82 | 82 |
| 83 | 83 |
| 84 | 84 |
| 85 | 85 |
| 86 | 86 |
| 87 | 87 |
| 88 | 88 |
| 89 | 89 |
| 90 | 90 |
| 91 | 91 |
| 92 | 92 |
| 93 | 93 |
| 94 | 94 |
| 95 | 95 |
| 96 | 96 |
| 97 | 97 |
| 98 | 98 |
| 99 | 99 |
| 100 | 100 |

| AMENDMENT B | | (Column 1) | | (Column 2) | (Column 3) |
|---|---------------------------|---|-------|---|------------------|
| | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total (37 CFR 1.16(c)) | • | Minus | ** | = |
| Independent (37 CFR 1.16(b)) | • | Minus | *** | = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | |

| RATE | ADDITIONAL FEE |
|--------------------|----------------|
| x \$ _____ = | |
| x \$ _____ = | |
| + \$ _____ = | |
| TOTAL ADD'L FEE | |

| | | | |
|--|--|--------------------------------------|--|
| (Column 1) | | (Column 2) | |
| (1) RATE | | CLAIM | |
| | | ADDITIONAL | |
| | | TIONAL FEE | |
| | | BEND. | |
| <input checked="" type="checkbox"/> \$ (37 C.F.R. 150) | | <input type="checkbox"/> Independent | |
| <input checked="" type="checkbox"/> \$ (37 C.F.R. 150) | | <input type="checkbox"/> | |
| <input type="checkbox"/> \$ | | <input type="checkbox"/> | |
| TOTAL | | | |
| ADD'L FEE | | | |

| | | (Column 1) | | (Column 2) | (Column 3) |
|-------------|---|---|-------|---|------------------|
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| | Total (37 CFR 1.16(c)) | * | Minus | ** | = |
| | Independent (37 CFR 1.16(b)) | * | Minus | *** | = |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | |

| RATE | ADDITIONAL FEE |
|--------------------|----------------|
| x \$ _____ = | |
| x \$ _____ = | |
| + \$ _____ = | |
| TOTAL ADD'L FEE | |

| | | |
|-----------------|-------------------|------------------------|
| | RATE | ADDITIONAL MONTHLY FEE |
| Total | \$ 67 CFA 10.00 | |
| Independent | X \$ 37 CFA 10.00 | |
| TOTAL ADD'L FEE | | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and, by the required by 37 CFR 1.16, to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.